Welcome to
The Peter B. Lewis Aquatic & Therapy Center of Menorah Park
Phone 216-595-7345
Fax 216-595-7322

YOU ARE RESPONSIBLE FOR KNOWING YOUR HEALTH INSURANCE BENEFITS.

CALL YOUR INSURANCE COMPANY TO ASK ABOUT COVERAGE FOR OUT PATIENT THERAPY. MANY PLANS REQUIRE PRE-AUTHORIZATION OR HAVE A LIMIT ON THE NUMBER OF VISITS.

OUR STAFF AND BILLING DEPARTMENT CANNOT GUARANTEE THAT YOUR INSURANCE PLAN WILL PAY FOR THERAPY SERVICES.

OUTPATIENT POLICY

CO-PAY MUST be paid at time therapy is rendered.
MENORAH PARK MISSION STATEMENT:

Menorah Park’s vision id to enable each individual it serves to realize the highest level of fulfillment in an atmosphere of respect, dignity and caring.

Historically serving people with special needs associated with aging, Menorah Park fulfills its vision by constantly challenging itself to identify and respond to the ever-changing needs of the community. We provide a comprehensive array of human services including long-term care, independent and assisted living, adult day care and community outreach, always demanding the highest standards of quality and excellence.

We accomplish our goals with a dedicated staff, motivated by compassion and sensitivity, and with a commitment to continuing development. We strive for exemplary national and local leadership through our research, education, administration and advocacy.

Our mission is enriched and achieved through a dynamic partnership among Board of trustees, staff, residents, their families, volunteers and the community, within a framework of traditional Jewish values.

Adopted by the Board of Trustees, October 12, 1993.

PETER B. LEWIS AQUATIC & THERAPY CENTER MISSION AND GOAL STATEMENT

- The Lewis Aquatic Center strives to provide a facility that functions with safe procedures, qualified therapy staff and enthusiastic instruction based upon the Menorah Park mission statement, while fulfilling the special needs associated with each individual.

  Just as every client is an individual, our staff works towards the enhancement of the client’s body, mind, and spirit through creative design of specialty therapeutic programs.

  Our goals are to:
  - Create a therapeutic environment that allows each individual served the opportunity to experience maximal level of functioning,
  - Provide opportunities to experience the joy and exhilaration of recreational activity,
  - Explore one’s therapeutic limits,
  - Experience physical achievement towards goals with the help of qualified staff.
OUT-PATIENT CLIENT’S BILL OF RIGHTS

Participant of Rehab Services have the right:

1. To a safe and clean environment suitable for rehabilitation. Clients have the right to expect adequate areas for evaluation and therapeutic services, adequate ventilation, good lighting, properly designed areas for maintaining personal hygiene, a clean facility with regular pest control, and responsible security.

2. To be treated with courtesy, dignity, respect and consideration. Clients shall not be required to perform services for the Department that are not included for therapeutic purposes in their plan of care.

3. Be given appropriate and professional quality services without discrimination against race, creed, color, religion, sex, national origin, sexual preference, or age.

4. To have all responsible requests responded to properly.

5. Be given the necessary information that enables you to participate in the development of your treatment plan and to give consent to your treatment plan prior to the start of any such treatment or prior to any changes in the plan being implemented.

6. To confidential treatment of personal and medical records and may approve or refuse their release to any individual outside the department except as required by law or third-party payment contract.

7. Be given information regarding anticipated termination of services.

8. To an understanding of the role of the individual responsible for coordinating services and identification of that individual.

9. To be informed of reimbursement procedures, billing processes and fees.

10. To voice grievances to the staff, to employees of the Department of Health and/or outside representative of their choice not associated with the operation of the Department (free from restraint, interference, coercion, discrimination or reprisal). All clients shall have a reasonable opportunity to participate in the decision making process affecting their treatment.

   Ohio Department of Health, toll free 1-800-342-0553 for complaints and questions.

11. Refuse services within the confines of the law, and be given information concerning the outcome of refusing services.
PETER B. LEWIS AQUATIC & THERAPY CENTER of MENORAH PARK
SUMMARY OF PRIVACY PRACTICES

This summary describes how your medical information may be used and disclosed and how you can access this information. Please review it carefully.

This document applies to Menorah Park and its affiliates, facilities, services, and programs provided on and off campus. The term client is applicable to all clients, tenants, residents, and participants who are served on and off campus.

Our Responsibilities

Our organization is required to:

- Maintain the privacy of your health information
- Provide you with this notice of our legal duties and privacy practices with respect to information we collect and maintain about you
- Abide by the terms of this Summary of Privacy Practices

Your Rights

As a client of our organization, you have several rights with regard to your health information, including the following:

- The right to request that we not use or disclose your health information in certain ways
- The right to request to receive communications in an alternative manner or location
- The right to access and obtain a copy of your health information
- The right to request an amendment to your health information
- The right to an accounting of disclosures of your health information

We reserve the right to change our privacy practices and to make the new provisions effective for all health information we maintain. Should our privacy practices change, we will post the changes on the bulletin board in our facility, as well as on our website. A copy of the revised notice will be available after the effective date of the changes upon request.

We will not use or disclose your health information without your authorization, except as described in this notice.

If you have questions and would like additional information, you may contact our facility’s Privacy Officer at 216-831-6500 ext. 279.
**SAFETY WARNING**

When leaving the aquatic center, if you need to turn left/west onto Cedar Road, we recommend that you drive around the back of the complex, turning right after Stone Gardens apartments, then right again on the Menorah Park main drive - David Myers parkway, to enable you to safely enter Cedar Road, at the traffic light.